PART B - FEE(S) TRANSMITTAL Complete and send this form, pigether with applicable fee(s), to: Mail Mail Stop ISSOL FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 NOV 0 1 2007 or Fax (571)-273-2885 INSTRUCTIONS: This form should be used for transporting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the strent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or direction in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 324 7590 08/28/2007 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. CIBA SPECIALTY CHEMICALS CORPORATION PATENT DEPARTMENT 540 WHITE PLAINS RD P O BOX 2005 (Depositor's name DeGacchis TARRYTOWN, NY 10591-9005 (Signature) 11/02/2007 FMETEKI2 00000109 031935 10553777 (Date) 1440.00 DA 01 FC:1501 ADDIATION NO 300 DO DA FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO 10/20/2005 Rinaldo Husler CO/2-22877/A/PCT 7749 10/553,777 TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF 1-PHENYLINDAN PHOTOINITIATORS PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN. TYPE **SMALL ENTITY ISSUE FEE DUE** \$1400 \$300 \$1700 11/28/2007 NO nonprovisional ART UNIT CLASS-SUBCLASS **EXAMINER** WITHERSPOON, SIKARL A 1621 568-300000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Joseph C. Suhadolnik (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. Region 10640 Region 108180 Manual OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY) Tarrytown, N.Y.

Ciba Specialty Chemicals Corporation 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: Issue Fee A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required (ee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1935 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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56,880 Registration No.

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